

AO 435 (Rev. 04/11)		Administrative Office of the United States Courts			FOR COURT USE ONLY	
TRANSCRIPT ORDER						DUE DATE:
<i>Please Read Instructions:</i>						
1. NAME Kendra Morries			2. PHONE NUMBER (213) 430-7801		3. DATE 3/18/2015	
4. MAILING ADDRESS 400 South Hope Street Room 1740			5. CITY Los Angeles		6. STATE CA	7. ZIP CODE 90071
8. CASE NUMBER 1:14-cv-00254		9. JUDGE Andrew S. Hanen		DATES OF PROCEEDINGS 10. FROM 12/19/2014 11. TO 12/19/2014		
12. CASE NAME State of Texas, et al. v. United States of America, et al.			LOCATION OF PROCEEDINGS 13. CITY Brownsville 14. STATE TX			
15. ORDER FOR <input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> CRIMINAL JUSTICE ACT <input type="checkbox"/> BANKRUPTCY <input checked="" type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL <input type="checkbox"/> IN FORMA PAUPERIS <input type="checkbox"/> OTHER						
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)						
PORTIONS		DATE(S)		PORTION(S)		United States District Court Southern District of Texas FILED
<input type="checkbox"/> VOIR DIRE				<input type="checkbox"/> TESTIMONY (Specify Witness)		MAR 23 2015
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)						
<input type="checkbox"/> OPENING STATEMENT (Defendant)						
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)		
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)						
<input type="checkbox"/> OPINION OF COURT						
<input type="checkbox"/> JURY INSTRUCTIONS				<input checked="" type="checkbox"/> OTHER (Specify)		
<input type="checkbox"/> SENTENCING				Telephonic Conference		12/19/2014
<input type="checkbox"/> BAIL HEARING						
17. ORDER						
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	COSTS	
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HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES			
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>				
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	0.00	
18. SIGNATURE <i>Kendra Morries</i>				PROCESSED BY		
19. DATE <i>3/18/2015</i>				PHONE NUMBER		
TRANSCRIPT TO BE PREPARED BY <i>Exceptional Reporting Serv.</i>				COURT ADDRESS		
ORDER RECEIVED	DATE <i>3/23/15</i>	BY <i>SC</i>				
DEPOSIT PAID			DEPOSIT PAID			
TRANSCRIPT ORDERED			TOTAL CHARGES	0.00		
TRANSCRIPT RECEIVED			LESS DEPOSIT	0.00		
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED			
PARTY RECEIVED TRANSCRIPT			TOTAL DUE	0.00		

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